

Best Available Copy

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	20	71058	1-13-99
ORIP CLASSIFIER	20		11/9/99
FORMALITY REVIEW	20	70622	7-26-99
	20	70622	4-7-99

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral)..... Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Final	Original	Date
1	1	1	
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Claim	Final	Original	Date
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions
 staple additional sheet here

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